

## General Assembly

## Raised Bill No. 5387

February Session, 2012

LCO No. 1683

\*01683\_\_\_\_\_INS\*

Referred to Committee on Insurance and Real Estate

Introduced by: (INS)

## AN ACT CONCERNING HEALTH INSURANCE CLAIM FORMS AND THE DEVELOPMENT OF A UNIFORM TREATMENT AUTHORIZATION FORM FOR MENTAL HEALTH SERVICES.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

- 1 Section 1. Subsections (a) and (b) of section 38a-477 of the general
- 2 statutes are repealed and the following is substituted in lieu thereof
- 3 (*Effective October 1, 2012*):
- 4 (a) Except where there is an agreement to the contrary between a
- 5 third-party payer and the health care provider, as defined in section
- 6 19a-17b, all health care providers shall submit all third-party claims for
- 7 payment on the current standard Health Care Financing
- 8 Administration Fifteen Hundred (HCFA1500) health insurance claim
- 9 form or its successor, or in the case of a hospital or other health care
- 10 institution, a Health Care Financing Administration UB-92 health
- 11 insurance claim form or its successor, or in accordance with other
- forms [which] that may be prescribed by the Insurance Commissioner.
- 13 With respect to the Health Care Financing Administration Fifteen
- 14 Hundred health insurance claim form or its successor or other form
- 15 prescribed by the commissioner for third-party claims for payment, a
- 16 <u>health care provider shall be allowed to use a National Provider</u>

- 17 Identifier assigned to such provider by the Centers for Medicare and
- 18 Medicaid Services' National Plan and Provider Enumeration System in
- 19 <u>lieu of such provider's federal tax identification number.</u>
- 20 (b) For any claim submitted to an insurer on the current standard
- 21 Health Care Financing Administration Fifteen Hundred health
- 22 insurance claim form or its successor, if the following information is
- 23 completed and received by the insurer, the claim may not be deemed
- 24 to be deficient in the information needed for filing a claim for
- 25 processing pursuant to subparagraph (B) of subdivision (15) of section
- 26 38a-816.

| T1  | Item Number              | Item Description                             |
|-----|--------------------------|--|
| T2  | 1a                       | Insured's identification number              |
| T3  | 2                        | Patient's name                               |
| T4  | 3                        | Patient's birth date and sex                 |
| T5  | 4                        | Insured's name                               |
| T6  | 10a                      | Patient's condition - employment             |
| T7  | 10b                      | Patient's condition - auto accident          |
| T8  | 10c                      | Patient's condition - other accident         |
| T9  | 11                       | Insured's policy group number                |
| T10 |                          | (if provided on identification card)         |
| T11 | 11d                      | Is there another health benefit plan?        |
| T12 | 17a                      | Identification number of referring physician |
| T13 | (if required by insurer) |  |
| T14 | 21                       | Diagnosis                                    |
| T15 | 24A                      | Dates of service                             |
| T16 | 24B                      | Place of service                             |
| T17 | 24D                      | Procedures, services or supplies             |
| T18 | <b>24</b> E              | Diagnosis code                               |
| T19 | 24F                      | Charges                                      |
| T20 | 25                       | Federal tax identification number            |
| T21 |                          | or National Provider Identifier              |
| T22 | 28                       | Total charge                                 |
| T23 | 31                       | Signature of physician or supplier with date |

T24 33 Physician's, supplier's billing name,
T25 address, zip code & telephone number

27 Sec. 2. (Effective from passage) Not later than January 1, 2013, the 28 Commissioner of Public Health, in consultation with the Insurance 29 Commissioner, the Commissioner of Mental Health and Addiction 30 Services, the Attorney General and the Healthcare Advocate, shall 31 develop a uniform treatment authorization form for mental health 32 services. Such form shall (1) be used by health care providers and 33 hospitals in this state to obtain patient authorization and information 34 for the provision of mental health services, (2) meet, at a minimum, 35 privacy standards set forth in state and federal privacy laws, including, 36 but not limited to, the Health Insurance Portability and Accountability 37 Act of 1996, P.L. 104-191, as amended from time to time, and any 38 regulations adopted thereunder, and (3) comply with state and federal 39 mental health parity laws. Not later than January 15, 2013, the 40 Commissioner of Public Health shall submit any proposed legislation 41 the Commissioner of Public Health deems necessary to implement the 42 use of such form to the joint standing committee of the General 43 Assembly having cognizance of matters relating to public health.

| This act sha sections: | ll take effect as follows | and shall amend the following |
|------------------------|---------------------------|-------------------------------|
| Section 1              | October 1, 2012           | 38a-477(a) and (b)            |
| Sec. 2                 | from passage              | New section                   |

## Statement of Purpose:

To allow health care providers to use a National Provider Identifier in lieu of a federal tax identification number on an HCFA1500 payment claim form, and to require the development of a uniform treatment authorization form for mental health services.

[Proposed deletions are enclosed in brackets. Proposed additions are indicated by underline, except that when the entire text of a bill or resolution or a section of a bill or resolution is new, it is not underlined.]